

STATE OF SOUTH CAROLINA

(Caption of Case)

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

COVER LETTER

DOCKET
NUMBER: _____

(Please type or print)

Submitted by: Budget PrePay, Inc. d/b/a Budget Phone

Address: 1325 Barksdale Boulevard, Suite 200
Bossier City, LA 71111

SC Bar Number:

Telephone: 318-671-5000

Fax: 318-671-5024

Other:

Email: lakishat@budgetprepay.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

DOCKETING INFORMATION (Check all that apply)

☐ Emergency Relief demanded in petition

☐ Request for item to be placed on Commission's Agenda expeditiously

☒ Other: Authorized Utility Representative

INDUSTRY (Check one)	NATURE OF ACTION (Check all that Apply)			
<input type="checkbox"/> Electric	<input type="checkbox"/> Affidavit	<input type="checkbox"/> Letter	<input type="checkbox"/> Request	
<input type="checkbox"/> Electric/Gas	<input type="checkbox"/> Agreement	<input type="checkbox"/> Memorandum	<input type="checkbox"/> Request for Certification	
<input type="checkbox"/> Electric/Telecommunications	<input type="checkbox"/> Answer	<input type="checkbox"/> Motion	<input type="checkbox"/> Request for Investigation	
<input type="checkbox"/> Electric/Water	<input type="checkbox"/> Appellate Review	<input type="checkbox"/> Objection	<input type="checkbox"/> Resale Agreement	
<input type="checkbox"/> Electric/Water/Telecom.	<input type="checkbox"/> Application	<input type="checkbox"/> Petition	<input type="checkbox"/> Resale Amendment	
<input type="checkbox"/> Electric/Water/Sewer	<input type="checkbox"/> Brief	<input type="checkbox"/> Petition for Reconsideration	<input type="checkbox"/> Reservation Letter	
<input type="checkbox"/> Gas	<input type="checkbox"/> Certificate	<input type="checkbox"/> Petition for Rulemaking	<input type="checkbox"/> Response	
<input type="checkbox"/> Railroad	<input type="checkbox"/> Comments	<input type="checkbox"/> Petition for Rule to Show Cause	<input type="checkbox"/> Response to Discovery	
<input type="checkbox"/> Sewer	<input type="checkbox"/> Complaint	<input type="checkbox"/> Petition to Intervene	<input type="checkbox"/> Return to Petition	
<input checked="" type="checkbox"/> Telecommunications	<input type="checkbox"/> Consent Order	<input type="checkbox"/> Petition to Intervene Out of Time	<input type="checkbox"/> Stipulation	
<input type="checkbox"/> Transportation	<input type="checkbox"/> Discovery	<input type="checkbox"/> Prefiled Testimony	<input type="checkbox"/> Subpoena	
<input type="checkbox"/> Water	<input type="checkbox"/> Exhibit	<input type="checkbox"/> Promotion	<input type="checkbox"/> Tariff	
<input type="checkbox"/> Water/Sewer	<input type="checkbox"/> Expedited Consideration	<input type="checkbox"/> Proposed Order	<input type="checkbox"/> Other:	
<input type="checkbox"/> Administrative Matter	<input type="checkbox"/> Interconnection Agreement	<input type="checkbox"/> Protest		
<input type="checkbox"/> Other:	<input type="checkbox"/> Interconnection Amendment	<input type="checkbox"/> Publisher's Affidavit		
	<input type="checkbox"/> Late-Filed Exhibit	<input checked="" type="checkbox"/> Report		



2600 Maitland Center Pkwy.
Suite 300
Maitland, FL 32751
P.O. Drawer 200
Winter Park, FL
32790-0200
Tel: 407-740-8575
Fax: 407-740-0613
www.tminc.com

March 29, 2013
Via Overnight Delivery

Clerk's Office
South Carolina Public Service Commission
101 Executive Center Dr.
Columbia, SC 29210

RE: Budget PrePay, Inc. d/b/a Budget Phone
SC Authorized Utility Representative

Dear Sir or Madam:

Enclosed please find a copy of the SC Authorized Utility Representative, filed on behalf of Budget PrePay, Inc. d/b/a Budget Phone. No check is enclosed as there are no remittance fees due.

Questions regarding this filing should be directed to my attention at 407-740-8575. Thank you for your assistance in this matter.

Sincerely,

Craig Neeld
Compliance Reporting Specialist

cc: Lakisha Taylor - Budget PrePay, Inc. d/b/a Budget Phone

file: Budget PrePay, Inc. d/b/a Budget Phone - Reporting - South Carolina

CN/jg

2013 APR - 1 AM 11:12
SC PUBLIC SERVICE
COMMISSION

RECEIVED

AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE: ☐ IXC ☒ CLEC ☐ ILEC ☒ Wireless

CERTIFICATED COMPANY INFORMATION

Budget PrePay, Inc.		
Company Name	PERSON	
Budget Phone	318-671-5000	
Dbal/fka	Telephone #	
1325 Barksdale Boulevard, Suite 200		
Mailing Address		
Bossier City, LA 71111		
City, State, Zip Code		
1325 Barksdale Boulevard, Suite 200		
Business Location		
Bossier City, LA 71111		
City, State, Zip Code		County

RECEIVED
 2013 APR - 1 AM 11:12
 SC PUBLIC SERVICE
 COMMISSION

REGISTERED AGENT INFORMATION

Registered Agent	National Registered Agents, Inc.	
Mailing Address:	2 Office Park Court, Suite 103	
City, State, Zip Code:	Columbia, SC 29223	

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- Lakisha Taylor**
- A. **General Manager** (Include Address if different than above)
- | | | |
|------------------|--------------------|-----------------------------|
| 318-671-5000 | / 318-671-5024 | / lakishat@budgetprepay.com |
| Telephone Number | / Facsimile Number | / E-mail Address |
- Lakisha Taylor**
- B. **Customer Relations/Complaints Representative** (Include Address if different than above)
- | | | |
|------------------|--------------------|-----------------------------|
| 318-671-5000 | / 318-671-5024 | / lakishat@budgetprepay.com |
| Telephone Number | / Facsimile Number | / E-mail Address |
- Lakisha Taylor**
- C1. **Customer Relations/Complaints Representative for Escalated Complaints** (Include address if different than above.)
- | | | |
|------------------|--------------------|-----------------------------|
| 318-671-5000 | / 318-671-5024 | / lakishat@budgetprepay.com |
| Telephone Number | / Facsimile Number | / E-mail Address |
- 888-424-5588**
- C2. **Customer Contact (Toll Free Number)**
- D. **Engineering Operations** (Include address if different than above.)
- | | | |
|------------------|--------------------|------------------|
| / | / | / |
| Telephone Number | / Facsimile Number | / E-mail Address |
- E. **Test and Repair** (Include address if different than above.)
- | | | |
|------------------|--------------------|------------------|
| / | / | / |
| Telephone Number | / Facsimile Number | / E-mail Address |
- Lakisha Taylor**
- F. **Emergencies** (During non-office hours)
- | | | |
|------------------|--------------------|-----------------------------|
| 318-671-5000 | / 318-671-5024 | / lakishat@budgetprepay.com |
| Telephone Number | / Facsimile Number | / E-mail Address |

In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:

Lakisha Taylor		
G.	Regulatory Officer (Include Address if different than above)	
	318-671-5000	/ 318-671-5024 / lakishat@budgetprepay.com
	Telephone Number	/ Facsimile Number / E-mail Address
Craig Neeld		
H.	Dual Party Mailings (Name)	
	P.O. Drawer 200, Winter Park, FL 32790-0200	
	(Mailing Address)	
	407-740-8575	/ 407-740-0613 / cneeld@tminc.com
	Telephone Number	/ Facsimile Number / E-mail Address
Craig Neeld		
I.	Interim LEC Fund Mailings (Name)	
	P.O. Drawer 200, Winter Park, FL 32790-0200	
	(Mailing Address)	
	407-740-8575	/ 407-740-0613 / cneeld@tminc.com
	Telephone Number	/ Facsimile Number / E-mail Address
Craig Neeld		
J.	Universal Service Fund Mailings (Name)	
	P.O. Drawer 200, Winter Park, FL 32790-0200	
	(Mailing Address)	
	407-740-8575	/ 407-740-0613 / cneeld@tminc.com
	Telephone Number	/ Facsimile Number / E-mail Address
Craig Neeld		
K.	Gross Receipts Mailings (Name)	
	P.O. Drawer 200, Winter Park, FL 32790-0200	
	(Mailing Address)	
	407-740-8575	/ 407-740-0613 / cneeld@tminc.com
	Telephone Number	/ Facsimile Number / E-mail Address
Craig Neeld		
L.	Lifeline Mailings (Name)	
	P.O. Drawer 200, Winter Park, FL 32790-0200	
	(Mailing Address)	
	407-740-8575	/ 407-740-0613 / cneeld@tminc.com
	Telephone Number	/ Facsimile Number / E-mail Address

This form was completed by

**TECHNOLOGIES MANAGEMENT INC.
AS ATTORNEY-IN-FACT
BY TOM FORTE, CONSULTANT**

Signature

Date

Title

RETURN COMPLETED FORM TO:

Public Service Commission of SC
Attn: Clerk's Office
Post Office Drawer 11649
Columbia, South Carolina 29211
And
Office of Regulatory Staff
Attn: Jeanne Gordon
1401 Main Street, Suite 900
Columbia, South Carolina 29201